



GHC Operational Policies

RECEIVED
JUL 15 2005
DEPARTMENT OF HEALTH
Center for Health Statistics

Group Health Charity Care	Policy Number: F-01-002 Revised: 4/1/05
----------------------------------	--

POLICY

It is the policy of Group Health Cooperative to provide Charity Care, which consists primarily of appropriate hospital-based emergency/urgent care department, outpatient or inpatient care and related follow up medical services for indigent persons. Charity Care shall be administered in accordance with The State of Washington Department of Health (DOH) regulations including those governing the type of services that can be provided as Charity Care and eligibility requirements for patients (RCW 70.170; WAC 246.453). Charity Care patients need not be an enrollee of Group Health.

Group Health Charity Care	Procedures for: F-01-002 Revised: 4/1/05
----------------------------------	---

PROCEDURES

Implementing Policy F-01-002

Note: These procedures provide additional information related to Policy F-01-002, but are separate and distinct from that policy. Group Health Cooperative management retains discretion in implementing these procedures and can change them at any time, with or without notice.

EXPLANATION:

Charity care is generally secondary to all other financial resources available to the patient, including: group or individual medical plans; Workers Compensation; Medicare; Medicaid or medical assistance programs; other state, federal or military programs; third party liability situations; or any other situation in which another person or entity may have a legal responsibility to pay for the costs of medical services.

In those situations where appropriate primary payment sources are not available, patients shall be considered for Charity Care in accordance with this policy. The GHC Sponsored

Care Program staff will provide and process applications, identify, and report Charity Care provided by GHC in accordance with state law.

APPLICABILITY:

This policy applies to all GHC/GHP departments, management, and employees.

DEFINITIONS:

Charity Care: Appropriate hospital-based medical services provided to indigent persons, as defined in this Policy.

Appropriate hospital-based medical care services: Hospital services which are reasonably calculated to diagnose, correct, cure, alleviate, or prevent the worsening of conditions that endanger life, or cause suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no other equally effective more conservative or substantially less costly course of treatment available or suitable for the person requesting the service. For purpose of this section, "course of treatment" may include mere observation or, where appropriate, no treatment at all.

Emergency/Urgent care or emergency services: Services provided for care related to an emergency medical or mental condition.

Emergency department and emergency room: That portion of the hospital facility organized for the purpose of providing emergency care or emergency services.

Emergency medical condition: means a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:

1. Placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy;
2. Serious impairment of bodily functions;
3. Serious dysfunction of any bodily organ or part.

With respect to a pregnant woman who is having contractions the term shall mean:

1. That there is inadequate time to effect a safe transfer to another hospital before delivery; or
2. That transfer may pose a threat to the health or safety of the woman or the unborn child.

Responsible patient of guarantor: The individual who is responsible for the payment of any hospital charges which are not subject to third-party sponsorship.

GUIDELINES:

Intake

Appropriate signage for access to Charity Care (including translations) is posted at main entrances and emergency/urgent care departments at GHC Eastside and Central Hospital facilities. The signage provides notice to patients that charges for services to patients meeting charity care criteria may be waived or reduced.

Urgent/emergency care facility staff shall pre-screen patients for possible Charity Care eligibility at pre-registration, registration, discharge, and at any other time the facility staff encounters information detailing the patient's financial need.

Assessment Of Eligibility

In order to be eligible, household income must be at or below 200% of the most recently published Federal Poverty Guidelines to qualify for Charity Care. GHC waives 100% of approved Charity Care charges and does not use a sliding scale to discount fees.

Patients who present at Group Health Cooperative's hospital-licensed emergency/urgent care facilities and indicate inability to pay may sign a GHC Sponsored Care Attestation form to apply for Charity Care assistance. The GHC Attestation Form allows a patient to attest that he/she is unable to pay, and has household income and assets below listed poverty level guidelines. GHC may request a completed application with household income documentation prior to final determination of eligibility; however, if the application procedure imposes an unreasonable burden upon the responsible party, the absence of documentation may not result in a denial of assistance.

Determination Of Eligibility

A patient may apply for Charity Care at any point in the revenue cycle, from pre-admission to final payment of the bill.

Patients requesting Charity Care on accounts with balances greater than two thousand dollars (\$2,000) may be required to fill out a GHC Sponsored Care application, provide income documentation, and/or apply for Medicaid benefits.

Any patient initially determined to meet Charity Care criteria will have thirty (30) calendar days to provide any required documentation before a final decision on eligibility is made. Group Health Cooperative will notify the patient of the final determination of Charity Care eligibility, or make a request for further income documentation, within fourteen (14) calendar days of receiving notification from the service facility.

Approval

Patient notification of Charity Care eligibility will include GHC's decision, the grounds for reaching the decision, and the amount, if any, the patient will be held responsible for. GHC Charity Care approval will include the thirty (30) calendar days following the date of the patient's approved initial Charity Care visit. All accounts with balances accrued during the Charity Care window will be affected.

Approved Charity Care accounts will be reviewed for third party responsibility. All third-party payment sources (including Medicaid) will be exhausted before Charity Care is applied.

Denial

In the event the Charity Care application is denied, the notice will include the reason or reasons for denial, the date of the decision, and instructions for appealing the denial.

The notice shall also specify that the patient will have thirty (30) calendar days to correct any deficiencies in documentation and to appeal the decision.

The failure of a responsible patient or guarantor to cooperate with reasonable application procedures shall be sufficient grounds for Group Health Cooperative to deny Charity Care waiver and initiate collection efforts directed at the patient.

Refund

In the event that a patient pays a portion or all of the charges related to appropriate hospital-based medical care services, and is subsequently found to have met the charity care criteria at the time that services were provided, payments shall be refunded to the patient within thirty days of achieving the charity care designation. The patient must provide a Sponsored Care application and all required documentation to be eligible for a refund.

SELECTED POLICIES AND DOCUMENTS:

WAC 246-453, Hospital Charity Care

RCW 70-170, Health Data And Charity Care

Authorized Vice President: Jim Truess, Executive Vice-President & Chief Financial Officer

Designated Content Expert: Bridget Tierney, Coordinator